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| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/695,683 | 10/29/2003 | Charles F. Cory JR. | CCORY.002A | 5049 |

| APPLICATION NO. | PILEYO DATE | | I MOT TOURS ATTENTON | | | | |
|---|--|-----------------------------|---|-----------------------------------|---------------------------|-------------------------------|--|
| 10/695,683 | 10/29/2003 | | Charles F. Cory JR. | | CCORY.002A | 5049 | |
| TITLE OF INVENTION | : HAND-HELD SELF- | DEFENSE DEVICE | | | | | |
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| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE | |
| nonprovisional | YES | \$755 | \$300 | 80 | \$1055 | 02/19/2009 | |
| EXAMINER | | ART UNIT | CLASS-SUBCLASS | | | | |
| CEGIELNIK, | URSZULA M | 3711 | 446-473000 | | | | |
| 1. Change of correspond | ence address or indication | on of "Fee Address" (37 | 2. For printing on the patent front page, list | | | | |
| CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. | | | the names of up to 3 registered patent attorneys or agents OR, alternatively. | | | | |
| | | | (2) the name of a singl | e firm (having as a mem | | & BEAR LLP | |
| ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer | | | registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3 | | | | |
| Number is required. | | | | | | | |
| 3. ASSIGNEE NAME A | ND RESIDENCE DAT | A TO BE PRINTED ON | THE PATENT (print or type data will appear on the o | xt) stant. If an acciones is i | identified below the di | norment has been filed for | |
| recordation as set for | th in 37 CFR 3.11. Com | pletion of this form is NC | | | | ocument has been filed for | |
| (A) NAME OF ASSI | GNEE | | (B) RESIDENCE: (CITY | and STATE OR COUN | TRY) | | |
| | | | | | | | |
| No. | | r categories (will not be p | rinted on the patent): | Individual D Comora | tion or other orivate are | oup entity Government | |
| Please check the appropr | riate assignee category o | | | | | | |
| 4a. The following fee(s) | are submitted: | 4 | b. Payment of Fee(s): (Ples | ase first reapply any pre | viously paid issue fee | shown above) | |
| A check is enclosed. A check is enclosed. Pulplication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. | | | | | | | |
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| 5. Change in Entity Sta | atus (from status indicato ns SMALL ENTITY stat | | ☐ h. Applicant is no lon | ger claiming SMALL EN | TITTY status. See 37 C | FR 1.27(g)(2). | |
| NOTEL: The Jenus bias as | ad Publication Fee (if rec | mired) will not be accente | d from anyone other than t | | | ne assignee or other party in | |
| interest as shown by the | records of the United St | ales Patent and Trademar | k Office. | | | | |
| Authorized Signature | | X | | Date 2 - 0 | 1-09 | | |
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| Typed or printed nan | ∞ Sabing H | Lee | Registration No. 43,745 | | | | |

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